

PM ATTACHMENT 3.14.3
ADMISSION TO RESIDENTIAL TREATMENT CENTER
AUTHORIZATION CRITERIA

A. DIAGNOSIS

A specific diagnosis within the range of 290 through 316.99 must be documented.

B. BEHAVIOR AND FUNCTIONING FOR ADMISSION

One of the following must be met:

1. The individual requires a highly structured Level I environment in order for treatment to succeed.
2. The individual is at risk of expulsion from home, community or other 24-hour community placement environment (e.g. Level II or Level III placement) due to disruptive behavior or other behavioral health symptoms that can be adequately treated in an RTC.
3. The individual's risk for elopement places him/her in imminent danger.
4. The individual's behavior would likely progress to harm to self or others without a highly structured 24-hour therapeutic environment.
5. The individual would benefit in other ways from the level of nursing and/or psychiatric attention or specific programming that would be unavailable in less restrictive settings (e.g. professional observation of an individual over time to clarify a diagnosis or to assess tolerance or responsiveness to a specific treatment/medication modality).
6. Level of functioning that does not meet the above criteria, but efforts to secure less restrictive settings suitable to the behavioral health needs of the individual have been exhausted and none are available.

All of the following must be met:

1. The individual does not require a level of medical supervision that surpasses the level available at a Level I RTC.
2. The individual does not require a level of behavioral supervision that surpasses that which is available at a Level I RTC.
3. If the need for this service is a social or economic one (e.g. housing), the need must affect the individual's underlying behavioral health problem, and its resolution requires this setting.
4. The admission is not used solely and clinically inappropriately as an alternative to incarceration or as a means to ensure community safety in an individual exhibiting primarily antisocial behavior.

C. EXPECTED RESPONSE

1. The disturbances of mood, thought, behavior or level of functioning, which were identified as reasons for admission can be expected to respond to treatments available, so that this service will no longer be needed.